

APPLICATION FOR WAIVER OF FEES FOR CHARITABLE, RELIGIOUS, PATRIOTIC & PHILANTHROPIC ORGANIZATIONS

Please fill in all blanks:

The following application is a request for a waiver of fees associated with the fundraising activities of a charitable, religious, patriotic and philanthropic organization.

Any organization, society, association or corporation desiring to solicit donations or have solicited in its name money, donations of money or property or financial assistance of any kind or desiring to sell distribute any item of literature or merchandise to persons other than members of such organization doorto-door or in public places, are required to furnish all of its members conducting solicitations identification cards stating the name of the organization, name of the agent and purpose of solicitation.

Name of Organization	1	Name of Contact Person				
Complete Mailing Address of Organization						
Daytime Phone Number	I.R.S. Non-Profit Certification Number (attach copy of form)					
Charitable Purpose of Organizat	ion					
List Officers & Directors of the ONAME	Organization: <u>ADDRESS</u>	<u>PHONE</u>				
Describe Nature of Activities to be sold:	pe conducted within the Town -	- Include description of any goods to				
Solicitation period – Include spec	rific dates and hours:					
Date(s):	Time(s)	:				

If a specific physical location in	Fountain Hills is	requested,	where will busine	ess will be transacted
Is this location on private prope owner to use the premises.	erty?Yes _	No	If yes, attach wr	itten permission from property
Detail any commission, fees, solicitation and the amount the			t if needed.	
Type of Expenditure(s):			Amount Paid	d:
Please explain how and what purpose of the organization:	ercentage of the	funds rais	ed will be used in	n fulfilling the charitable
Note: Pursuant to 8-2-13 or transient merchant, the bearing the words "No Pesuch terms or terms similar have been requested to lespecified above or not".	of the Town Codir agents or represeddlers" or "No Car thereto is expos	rocessed.) e: "It is unlentatives, to canvassers" sed to publi	awful for any peo o come upon any or "No Solicitors c view or to rema	ddler, solicitor, canvasser premises whereon a sign " or any combination of ain on any premises after
Date Signature of Appli	cant	Printed Na	ame of Applicant	Title
Please return this completed appli	cation to: Town of Four Office of the P. O. Box 179 Fountain Hil	Town Cler 958		
Date Application Received:				
License Fees to be Waived If no:				
Exemption Approved by Law Enfor	rcement:		Date	
Approved by Town Clerk:			Date:	
Date Permit Issued:			Permit Number	